DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMAGE GENE	CRATING APPARATUS,	, IMAGE GE	NERATING METHO	DD, AND PROG	RAM			
the application of whi 図 is attached		OR -	☐ was filed on	ernational Applic	ation Num	ber mended on		
	ave reviewed and underst ecifically referred to abov		nts of the above ider	ntified application	n, including	g the claim	s, as amended	
continuation-in-part a	luty to disclose informa pplication(s), material international filing date of	formation which	ch became available	between the fili				
or plant breeder's right than the United States	n priority benefits under 3 nts certificate(s), or 365(a s of America, listed belowant breeder's rights certification is claimed.	a) of any PCT w and have als	international applications identified below,	ation(s) which do by checking the	esignated a box, any	t least one foreign app	country other lication(s) for	
Prior Foreign Appli	eation Number(a)	Country	Formi	ign Filing Date	1	Priority Cla	nimed No	
2003-028178	* *	JAPAN		ry 5, 2003		Yes Ø		
States provisional app insofar as the subjec International applicati to disclose any inform	cic priority benefits under olication(s), or §365(c) of t matter of each of the on in the manner provide nation material to the pate application and the natio	f any PCT Inte claims of this d by the first pentability of the	ernational application is application is not paragraph of Title 35 his application as de	n(s) designating to disclosed in a 5, United States (fined in 37 C.F.I	the United listed prio Code, §112 R. 1.56 whi	States, lister United States, I acknowledge	ed below and, States or PCT ledge my duty	
Prior U.S. or International Application Number(s)) 1	U.S. or International Filing Date			Status		
I hereby appoint all at	torneys of SUGHRUE	 MION, PLL	C who are listed un	der the USPTO	Customer	Number sh	own below as	

I hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INV	ENTOR:							
Given Name (first and middle [if any]) Nor	Family Name or Surname HATAKEDA							
YAA HAL								
m 1		Tanan	Date					
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Given Name								
(first and middle [if any]) Family Name or Surname								
Inventor's Signature	<u>.</u>		Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip		Country				
NAME OF THIRD INVENTOR:								
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City	State	Zip		Country				
NAME OF FOURTH INVENTOR								
Given Name								
(first and middle [if any]) Family Name or Surname								
Inventor's Signature	T	Date						
Residence: City	State	Country		Citizenship				
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NAME OF FIFTH INVENTOR:								
Given Name (first and middle [if any]) Family Name or Surname								
		Family Name or Surname						
Inventor's Signature		1:	Date					
Residence: City	State .	Country		Citizenship				
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